

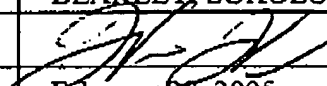
FACSIMILE: (714) 557-3347

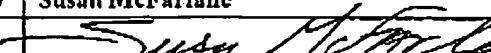
FEB 28 2005

PAGE 1/11 \* RCVD AT 2/28/2005 7:22:35 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/5 \* DNIS:8729306 \* CSID:7145573347 \* DURATION (mm-ss):03-56

|  |  |                      |                        |            |
|--|--|----------------------|------------------------|------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |  | Application No.      | 09/965,596             |            |
|  |  | Filing Date          | September 26, 2001     |            |
|  |  | First Named Inventor | James Mercs            |            |
|  |  | Art Unit             | 2644                   |            |
|  |  | Examiner Name        | Justin I. Michalski    |            |
| Total Number of Pages in This Submission   |  | 10                   | Attorney Docket Number | 80398P118C |

| ENCLOSURES (check all that apply)  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> PTO/SB/08<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Basic Filing Fee<br><input type="checkbox"/> Declaration/POA<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below):<br><div style="border: 1px solid black; height: 60px; width: 100%;"></div> |
| Remarks  |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm or Individual name                    | William W. Schaal, Reg. No. 39,018<br>BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP        |
| Signature                                  |  |
| Date                                       | February 28, 2005   |

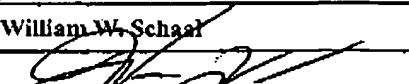
| CERTIFICATE OF MAILING/TRANSMISSION  |   |      |                   |
|--|---|------|-------------------|
| I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office. |   |      |                   |
| Typed or printed name  | Susan McFarlane   |      |                   |
| Signature  |  | Date | February 28, 2005 |

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w) 08/04/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

|  |      |                      |                     |
|--|------|----------------------|---------------------|
| <b>FEE TRANSMITTAL<br/>for FY 2005</b><br><i>Patent fees are subject to annual revision.</i> |      | Complete if Known    |                     |
|  |      | Application Number   | 09/965,596          |
|  |      | Filing Date          | September 26, 2001  |
|  |      | First Named Inventor | James Meres         |
|  |      | Examiner Name        | Justin I. Michalski |
|  |      | Art Unit             | 2644                |
|  |      | Attorney Docket No.  | 80398PIT8C          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.              |      |                      |                     |
| TOTAL AMOUNT OF PAYMENT  | (\$) | 120.00               |                     |

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|---|--|
| METHOD OF PAYMENT (check all that apply)  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____    |  |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor &amp; Zafman LLP</u>                                |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee   |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments |  |

| FEE CALCULATION   |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
|---|--------------|----------|----------|--|--------------|--------------|----------|----------|-----------------|----------|------|------|-----|------------------------|-------------------------------------|------|------|------|-----------------------------------|------|--|-----|------|---------------------------------------|------|------|---------------------------|-----|--|------|------|-----|--|---|--------------|------|-----|-----|---|--|------|------|-------|-----|--|--|------|------|-------|-----|---|--|------|------|-------|-------|--|--|------|------|-----|-----|------------------|--|------|------|-----|-----|--|--|------|------|-------|-----|--------------------------|--|------|------|-------|-------|---|--|------|------|-----|-----|-----------------------------|--|------|------|----|----|-------------------------------------|--|------|------|-----|-----|---|--|------|------|-----|-----|---|--|------|------|-----|-----|--|--|----------------------|--|--|--|--|--|--------------|--|--|--|------------|
| 1. EXTRA CLAIM FEES   |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| Total Claims:   | 20           | 20*      | 0        | 50.00  | 0.00         |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| Independent Claims:   | 5            | 5*       | 0        | 200.00   | 0.00         |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| Multiple Dependent  |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee Code</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>2202</td> <td>50</td> <td>25</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>2201</td> <td>200</td> <td>100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>2203</td> <td>300</td> <td>180</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>1204</td> <td>2204</td> <td>300</td> <td>150</td> <td>*Reissue independent claims over original patent</td> </tr> <tr> <td>1205</td> <td>2205</td> <td>300</td> <td>150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td>(5) 0.00</td> </tr> </tbody> </table>  |              |          |          |  | Large Entity | Small Entity | Fee Code | Fee Code | Fee Description | 1202     | 2202 | 50   | 25  | Claims in excess of 20 | 1201                                | 2201 | 200  | 100  | Independent claims in excess of 3 | 1203 | 2203   | 300 | 180  | Multiple Dependent claim, if not paid | 1204 | 2204 | 300                       | 150 | *Reissue independent claims over original patent | 1205 | 2205 | 300 | 150                                    | **Reissue claims in excess of 20 and over original patent | SUBTOTAL (1) |      |     |     | (5) 0.00                                |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| Large Entity  | Small Entity | Fee Code | Fee Code | Fee Description  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1202  | 2202         | 50       | 25       | Claims in excess of 20   |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1201  | 2201         | 200      | 100      | Independent claims in excess of 3                                |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1203  | 2203         | 300      | 180      | Multiple Dependent claim, if not paid                            |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1204  | 2204         | 300      | 150      | *Reissue independent claims over original patent                 |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1205  | 2205         | 300      | 150      | **Reissue claims in excess of 20 and over original patent        |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| SUBTOTAL (1)  |              |          |          | (5) 0.00   |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| *for number previously paid, if greater, For Reissues, see below  |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 2. ADDITIONAL FEES  |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee Code</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>2051</td> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>2052</td> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>2003</td> <td>2003</td> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1251</td> <td>2251</td> <td>120</td> <td>60</td> <td>Extension for reply within first month</td> <td>120.00</td> </tr> <tr> <td>1252</td> <td>2252</td> <td>450</td> <td>225</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>2253</td> <td>1,020</td> <td>510</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>2254</td> <td>1,590</td> <td>795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2255</td> <td>2,160</td> <td>1,080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>2401</td> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>2402</td> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>2403</td> <td>1,000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1401</td> <td>2401</td> <td>1,510</td> <td>1,510</td> <td>Patent to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1460</td> <td>2400</td> <td>130</td> <td>130</td> <td>Patrons in the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>1807</td> <td>60</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(a)</td> <td></td> </tr> <tr> <td>1800</td> <td>1800</td> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>1809</td> <td>1809</td> <td>750</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>2810</td> <td>790</td> <td>395</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td colspan="4">Other fee (specify):</td> <td></td> <td></td> </tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td>(3) 120.00</td> </tr> </tbody> </table> |              |          |          |  | Large Entity | Small Entity | Fee Code | Fee Code | Fee Description | Fee Paid | 1051 | 2051 | 130 | 65                     | Surcharge - late filing fee or oath |      | 1052 | 2052 | 50                                | 25   | Surcharge - late provisional filing fee or cover sheet |     | 2003 | 2003                                  | 130  | 130  | Non-English specification |     | 1251   | 2251 | 120  | 60  | Extension for reply within first month | 120.00  | 1252         | 2252 | 450 | 225 | Extension for reply within second month |  | 1253 | 2253 | 1,020 | 510 | Extension for reply within third month |  | 1254 | 2254 | 1,590 | 795 | Extension for reply within fourth month |  | 1255 | 2255 | 2,160 | 1,080 | Extension for reply within fifth month |  | 1401 | 2401 | 500 | 250 | Notice of Appeal |  | 1402 | 2402 | 500 | 250 | Filing a brief in support of an appeal |  | 1403 | 2403 | 1,000 | 500 | Request for oral hearing |  | 1401 | 2401 | 1,510 | 1,510 | Patent to institute a public use proceeding |  | 1460 | 2400 | 130 | 130 | Patrons in the Commissioner |  | 1807 | 1807 | 60 | 50 | Processing fee under 37 CFR 1.17(a) |  | 1800 | 1800 | 180 | 180 | Submission of Information Disclosure Stmt |  | 1809 | 1809 | 750 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 2810 | 790 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | Other fee (specify): |  |  |  |  |  | SUBTOTAL (2) |  |  |  | (3) 120.00 |
| Large Entity  | Small Entity | Fee Code | Fee Code | Fee Description  | Fee Paid     |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1051  | 2051         | 130      | 65       | Surcharge - late filing fee or oath                              |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1052  | 2052         | 50       | 25       | Surcharge - late provisional filing fee or cover sheet           |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 2003  | 2003         | 130      | 130      | Non-English specification  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1251  | 2251         | 120      | 60       | Extension for reply within first month                           | 120.00       |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1252  | 2252         | 450      | 225      | Extension for reply within second month                          |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1253  | 2253         | 1,020    | 510      | Extension for reply within third month                           |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1254  | 2254         | 1,590    | 795      | Extension for reply within fourth month                          |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1255  | 2255         | 2,160    | 1,080    | Extension for reply within fifth month                           |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1401  | 2401         | 500      | 250      | Notice of Appeal   |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1402  | 2402         | 500      | 250      | Filing a brief in support of an appeal                           |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1403  | 2403         | 1,000    | 500      | Request for oral hearing   |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1401  | 2401         | 1,510    | 1,510    | Patent to institute a public use proceeding                      |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1460  | 2400         | 130      | 130      | Patrons in the Commissioner                                      |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1807  | 1807         | 60       | 50       | Processing fee under 37 CFR 1.17(a)                              |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1800  | 1800         | 180      | 180      | Submission of Information Disclosure Stmt                        |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1809  | 1809         | 750      | 395      | Filing a submission after final rejection (37 CFR § 1.129(a))    |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| 1810  | 2810         | 790      | 395      | For each additional invention to be examined (37 CFR § 1.129(b)) |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| Other fee (specify):  |              |          |          |  |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |
| SUBTOTAL (2)  |              |          |          | (3) 120.00   |              |              |          |          |                 |          |      |      |     |                        |                                     |      |      |      |                                   |      |  |     |      |                                       |      |      |                           |     |  |      |      |     |  |   |              |      |     |     |   |  |      |      |       |     |  |  |      |      |       |     |   |  |      |      |       |       |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |       |     |                          |  |      |      |       |       |   |  |      |      |     |     |                             |  |      |      |    |    |                                     |  |      |      |     |     |   |  |      |      |     |     |   |  |      |      |     |     |  |  |                      |  |  |  |  |  |              |  |  |  |            |

|                   |   |                                   |                |
|-------------------|---|-----------------------------------|----------------|
| SUBMITTED BY      |   | Complete (if applicable)          |                |
| Name (Print/Type) | William W. Schaal   | Registration No. (Attorney/Agent) | 39,018         |
| Signature         |  | Telephone                         | (714) 557-3800 |
|                   |   | Date                              | 02/28/05       |

Based on PTO/SB/17 (12-04) as modified by Blakey, Sokoloff, Taylor & Zafman (M1) 12/15/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

| <b>FEE TRANSMITTAL<br/>for FY 2005</b>  |  | <i>Complete if Known</i> |                     |
|---|--|--------------------------|---------------------|
| <small>Percent fees are subject to annual revision.</small>                     |  | Application Number       | 09/965,596          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. |  | Filing Date              | September 26, 2001  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$)   |  | First Named Inventor     | James Meres         |
| 120.00  |  | Examiner Name            | Justin I. Michalski |
|   |  | Art Unit                 | 2644                |
|   |  | Attorney Docket No.      | 80398P118C          |

| <b>METHOD OF PAYMENT (check all that apply)</b>  |  |
|--|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |  |
| <input checked="" type="checkbox"/> Deposit Account   Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor &amp; Zafman LLP</u>                           |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input checked="" type="checkbox"/> Credit any overpayments   |  |
| under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.   |  |

| <b>FEE CALCULATION</b>  |                     |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
|---|---------------------|--|-----------------|----------|---------------------|---------------------|--------|--------|--------------------|-----------|-------------------------------------|---|-----------|-----------|--|--------|--------------------|------------|---------------------------|--|------------|-----------|--|--|---|--------------|---|-----------------|---------------------|---------------------|--|-----------|--------------|------------------------|---|------------|-----------------------------------|--------------|--|--|------------|------------|---|------------|------------|---|--|--|--------------|------------|--------------------------|------|--------------|--------------|---|--|------------|------------|-------------------------------|--|-----------|-----------|-------------------------------------|--|------------|------------|--|--|------------|------------|---|--|------------|------------|--|--|---------------------|--|------|--------|--|---------------------|--|
| <b>1. EXTRA CLAIM FEES</b>  |                     |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| <table border="0" style="width:100%;"> <tr> <td style="text-align: right;">Total Claims</td> <td style="border: 1px solid black; width: 50px; text-align: center;">20</td> <td style="text-align: right;">- 20*</td> <td style="border: 1px solid black; width: 50px; text-align: center;">0</td> <td style="text-align: right;">x</td> <td style="border: 1px solid black; width: 100px; text-align: center;">\$0.00</td> <td style="text-align: right;">=</td> <td style="border: 1px solid black; width: 100px; text-align: center;">\$0.00</td> </tr> <tr> <td style="text-align: right;">Independent Claims</td> <td style="border: 1px solid black; text-align: center;">5</td> <td style="text-align: right;">- 5*</td> <td style="border: 1px solid black; text-align: center;">0</td> <td style="text-align: right;">x</td> <td style="border: 1px solid black; text-align: center;">200.00</td> <td style="text-align: right;">=</td> <td style="border: 1px solid black; text-align: center;">\$0.00</td> </tr> <tr> <td style="text-align: right;">Multiple Dependent</td> <td colspan="7"></td> </tr> </table>   | Total Claims        | 20   | - 20*           | 0        | x                   | \$0.00              | =      | \$0.00 | Independent Claims | 5         | - 5*                                | 0 | x         | 200.00    | =  | \$0.00 | Multiple Dependent |            |                           |  |            |           |  |  | <table border="0" style="width:100%;"> <tr> <td style="text-align: right;">Large Entity</td> <td style="text-align: right;">Small Entity</td> <td style="text-align: left;">Fee Description</td> </tr> <tr> <td style="text-align: right;">Fee Code   Fee (\$)</td> <td style="text-align: right;">Fee Code   Fee (\$)</td> <td></td> </tr> <tr> <td style="text-align: right;">1202   50</td> <td style="text-align: right;">2202   25</td> <td>Claims in excess of 20</td> </tr> <tr> <td style="text-align: right;">1201   200</td> <td style="text-align: right;">2201   100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td style="text-align: right;">1203   300</td> <td style="text-align: right;">2203   100</td> <td>Multiple Dependent claims, if not paid</td> </tr> <tr> <td style="text-align: right;">1204   300</td> <td style="text-align: right;">2204   150</td> <td>**Reissue independent claims over original patent</td> </tr> <tr> <td style="text-align: right;">1205   300</td> <td style="text-align: right;">2205   150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="text-align: right;">(\$)</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right; border: 1px solid black;">0.00</td> </tr> </table> | Large Entity | Small Entity                            | Fee Description | Fee Code   Fee (\$) | Fee Code   Fee (\$) |  | 1202   50 | 2202   25    | Claims in excess of 20 | 1201   200                              | 2201   100 | Independent claims in excess of 3 | 1203   300   | 2203   100                             | Multiple Dependent claims, if not paid | 1204   300 | 2204   150 | **Reissue independent claims over original patent | 1205   300 | 2205   150 | **Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (1)</b>                    |  | (\$)         |            |                          | 0.00 |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Total Claims  | 20                  | - 20*  | 0               | x        | \$0.00              | =                   | \$0.00 |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Independent Claims  | 5                   | - 5*   | 0               | x        | 200.00              | =                   | \$0.00 |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Multiple Dependent  |                     |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Large Entity  | Small Entity        | Fee Description  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Fee Code   Fee (\$)   | Fee Code   Fee (\$) |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1202   50   | 2202   25           | Claims in excess of 20   |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1201   200  | 2201   100          | Independent claims in excess of 3                                |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1203   300  | 2203   100          | Multiple Dependent claims, if not paid                           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1204   300  | 2204   150          | **Reissue independent claims over original patent                |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1205   300  | 2205   150          | **Reissue claims in excess of 20 and over original patent        |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| <b>SUBTOTAL (1)</b>   |                     | (\$)   |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
|   |                     | 0.00   |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| <b>2. ADDITIONAL FEES</b>   |                     |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| <table border="0" style="width:100%;"> <tr> <td style="text-align: right;">Large Entity</td> <td style="text-align: right;">Small Entity</td> <td style="text-align: left;">Fee Description</td> <td style="text-align: right;">Fee Paid</td> </tr> <tr> <td style="text-align: right;">Fee Code   Fee (\$)</td> <td style="text-align: right;">Fee Code   Fee (\$)</td> <td></td> <td></td> </tr> <tr> <td style="text-align: right;">1051   130</td> <td style="text-align: right;">2051   65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td style="text-align: right;">1052   50</td> <td style="text-align: right;">2052   25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td style="text-align: right;">2053   130</td> <td style="text-align: right;">2253   130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td style="text-align: right;">1251   120</td> <td style="text-align: right;">2251   80</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td style="text-align: right;">1252   450</td> <td style="text-align: right;">2252   225</td> <td>Extension for reply within second month</td> <td style="text-align: right;">120.00</td> </tr> <tr> <td style="text-align: right;">1253   1,020</td> <td style="text-align: right;">2253   510</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td style="text-align: right;">1254   1,500</td> <td style="text-align: right;">2254   795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td style="text-align: right;">1255   2,160</td> <td style="text-align: right;">2255   1,080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td style="text-align: right;">1401   500</td> <td style="text-align: right;">2401   250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td style="text-align: right;">1402   500</td> <td style="text-align: right;">2402   250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td style="text-align: right;">1403   1,000</td> <td style="text-align: right;">2403   500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td style="text-align: right;">1451   1,510</td> <td style="text-align: right;">2451   1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td style="text-align: right;">1460   130</td> <td style="text-align: right;">2460   130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td style="text-align: right;">1807   50</td> <td style="text-align: right;">1807   50</td> <td>Processing fee under 37 CFR 1.17(g)</td> <td></td> </tr> <tr> <td style="text-align: right;">1806   180</td> <td style="text-align: right;">1806   180</td> <td>Submission of Information Disclosure Sheet</td> <td></td> </tr> <tr> <td style="text-align: right;">1809   700</td> <td style="text-align: right;">1809   305</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td style="text-align: right;">1810   780</td> <td style="text-align: right;">2810   385</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td style="text-align: right;">(\$)</td> <td style="text-align: right; border: 1px solid black;">120.00</td> </tr> </table> | Large Entity        | Small Entity   | Fee Description | Fee Paid | Fee Code   Fee (\$) | Fee Code   Fee (\$) |        |        | 1051   130         | 2051   65 | Surcharge - late filing fee or oath |   | 1052   50 | 2052   25 | Surcharge - late provisional filing fee or cover sheet |        | 2053   130         | 2253   130 | Non-English specification |  | 1251   120 | 2251   80 | Extension for reply within first month |  | 1252   450  | 2252   225   | Extension for reply within second month | 120.00          | 1253   1,020        | 2253   510          | Extension for reply within third month |           | 1254   1,500 | 2254   795             | Extension for reply within fourth month |            | 1255   2,160                      | 2255   1,080 | Extension for reply within fifth month |  | 1401   500 | 2401   250 | Notice of Appeal                                  |            | 1402   500 | 2402   250  | Filing a brief in support of an appeal |  | 1403   1,000 | 2403   500 | Request for oral hearing |      | 1451   1,510 | 2451   1,510 | Petition to institute a public use proceeding |  | 1460   130 | 2460   130 | Petitions to the Commissioner |  | 1807   50 | 1807   50 | Processing fee under 37 CFR 1.17(g) |  | 1806   180 | 1806   180 | Submission of Information Disclosure Sheet |  | 1809   700 | 1809   305 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810   780 | 2810   385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | <b>SUBTOTAL (2)</b> |  | (\$) | 120.00 | <table border="0" style="width:100%;"> <tr> <td style="text-align: right;">Other fee (specify)</td> <td></td> </tr> </table> | Other fee (specify) |  |
| Large Entity  | Small Entity        | Fee Description  | Fee Paid        |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Fee Code   Fee (\$)   | Fee Code   Fee (\$) |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1051   130  | 2051   65           | Surcharge - late filing fee or oath                              |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1052   50   | 2052   25           | Surcharge - late provisional filing fee or cover sheet           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 2053   130  | 2253   130          | Non-English specification  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1251   120  | 2251   80           | Extension for reply within first month                           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1252   450  | 2252   225          | Extension for reply within second month                          | 120.00          |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1253   1,020  | 2253   510          | Extension for reply within third month                           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1254   1,500  | 2254   795          | Extension for reply within fourth month                          |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1255   2,160  | 2255   1,080        | Extension for reply within fifth month                           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1401   500  | 2401   250          | Notice of Appeal   |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1402   500  | 2402   250          | Filing a brief in support of an appeal                           |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1403   1,000  | 2403   500          | Request for oral hearing   |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1451   1,510  | 2451   1,510        | Petition to institute a public use proceeding                    |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1460   130  | 2460   130          | Petitions to the Commissioner                                    |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1807   50   | 1807   50           | Processing fee under 37 CFR 1.17(g)                              |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1806   180  | 1806   180          | Submission of Information Disclosure Sheet                       |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1809   700  | 1809   305          | Filing a submission after final rejection (37 CFR § 1.129(a))    |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| 1810   780  | 2810   385          | For each additional invention to be examined (37 CFR § 1.129(b)) |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| <b>SUBTOTAL (2)</b>   |                     | (\$)   | 120.00          |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |
| Other fee (specify)   |                     |  |                 |          |                     |                     |        |        |                    |           |                                     |   |           |           |  |        |                    |            |                           |  |            |           |  |  |   |              |   |                 |                     |                     |  |           |              |                        |   |            |                                   |              |  |  |            |            |   |            |            |   |  |  |              |            |                          |      |              |              |   |  |            |            |                               |  |           |           |                                     |  |            |            |  |  |            |            |   |  |            |            |  |  |                     |  |      |        |  |                     |  |

| <b>SUBMITTED BY</b> |   | <i>Complete (if applicable)</i>   |                |
|---------------------|---|-----------------------------------|----------------|
| Name (Print/Type)   | William W. Schaal   | Registration No. (Attorney/Agent) | 39,018         |
| Signature           |  | Telephone                         | (714) 557-3800 |
|                     |   | Date                              | 02/28/05       |

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/12/15/2004)  
 SEND TO: Commissioner for Patents, P.O. Box 1470, Alexandria, VA 22313-1470

Docket No.: 80398P118C

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**RECEIVED  
CENTRAL FAX CENTER****FEB 28 2005**

In Re the Application of:

JAMES MERCS, ET AL.

Art Group: 2644

Application No.: 09/965,596

Examiner: Justin I. Michalski

Filed: September 26, 2001

For: **Multi-Mode LED Indicators for Recording  
Devices****PETITION FOR EXTENSION OF TIME PURSUANT TO 37 C.F.R. § 1.136(a)**Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In accordance with 37 C.F.R. § 1.136(a), Applicants for the above-identified application respectfully Petition the Commissioner for a one (1) month extension of time, extending the period for response to March 13, 2005, from the Restriction Requirement dated January 13, 2005. The petition filing fee of \$120.00 and a Response to Restriction Requirement are attached.

If it should be determined that a longer extension of time is required to prevent this application from being abandoned, please charge any additional fees to Deposit Account No. 02-2666. A copy of the Fee Transmittal is enclosed for deposit account charging purposes.

Respectfully submitted,

Blakely, Sokoloff, Taylor &amp; Zafman LLP

Date: February 28, 2005  
William W. Schaal, Reg. No. 39,01812400 Wilshire Boulevard, 7th Floor  
Los Angeles, CA 90025  
Telephone: (714) 557-3800**CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.

  
Susan McFarlane

02-28-05

Date